IAP10 Rec'd PCT/PTO 18 NOV 2005

PTO/SB/01 (09-04)

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DECLARATION FOR UTILITY OR		Attomey I Number	Docket	348-077			
DESIGN			First Nam	ed Inventor	COOPER, DAVID NE	EAL ET AL.	
PATENT APPLICATION			COMPLETE IF KNOWN				
(37 CFR 1.63)		Applicatio	n Number	10/535,0	05		
Declaration Submitted OR	Declaration - Submitted after In Filing (surcharge		Filing Date	е	05/12/200		
With Initial Filing		surcharge	Art Unit		·		
		(37 CFR 1.16 (e)) required)		Examiner Name			
I hereby declare that:							
Each inventor's residence, ma	alling address,	and citizenship are	as stated b	elow next to the	eir name.		
I believe the inventor(s) name	d below to be t	he original and first	t inventor(s)	of the subject	matter which is clair	ned and for	
which a patent is sought on the GROWTH HORMONE	VARIATION EN	ONS IN HUMA	NS AND	ITS USES		· .	
	•						
(Title of the Invention) the specification of which							
is attached hereto							
OR .							
V 11/04/2003							
			as Unit	ed States Appl	ication Number or P	CT International	
Application Number PCT/GB2003/004775 and was amended on (MM/DD/YYYY) (if applicable					(if applicable).		
I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.							
I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for							
continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.							
I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent							
country other than the United States of America, listed below and have also identified below, by checking the box, any foreign							
application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.							
Prior Foreign Application		Foreign Filing	g Date	Priority	Certified C	opy Attached?	
Number(s) 0226441.4	Country	(MM/DD/YY	YY)	Not Claim		NO NO	
	GB	11/12/2002	ļ	Ц			
PCT/GB01/05112	GB	11/12/2002					
0308242.7	GB	04/10/2003					
The Addition of the Control of the C							
Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.							

[Page 1 of 2]
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DECLARATION — Utility or Design Patent Application

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Name						•	
. Address						<u> </u>	
City			State		<u></u>		ZIP
Country	Telephor	ie		,	Fax	l	
I hereby declare that all statem and belief are believed to be statements and the like so mad false statements may jeopardiz	e true; and further that t de are punishable by fine	hese state or imprisor	ments we iment, or t	re made vooth, under	with the	e knov	wledge that willful false
NAME OF SOLE OR FIRST IN	IVENTOR:	A per	tition has b	een filed f	or this u	ınsign	ed inventor
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Given Name (first and middle [in ANN) MARIE				amily Nan	ne or Su	urnam	е
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City	State		Zip Co		ountry	ountry	
CARDIFF			CF 14	4XN	GI	REAT E	BRITAIN
Additional inventors or a legal rep	presentative are being named on	thesur	plemental sh	eet(s) PTO/S	B/02A or	02LR at	tached hereto.

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DECLARATION	Supplemen	ntal Sheet	Page 3 of 3			
Name of Additional Joint Inventor, if an		A net	tition has been filed for this			
Given Name (first and middle (if any	A petition has been filed for this unsigned inventor					
JOHN	GREGORY	ne or Sumame				
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Given Name (first and middle (if any)	Family Name or Surname					
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Inventor's Signature Mark Lei				Date 12-7-05		
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DECLARA	ADDITIO Supplemen	NAL INVENTOR(S	it contains a valid OMB control number. Page 4 of 4			
Name of Additional Joint Inve	ntor, if any:	A pet	ition has been filed for t	this unsigned inventor		
Given Name (first and n	niddle (if any))	Family Nam	e or Sumame			
ANGELES	- ^	ULIED				
Inventor's Signature				Date 3-10-01		
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PHARMACIA SPAIN S.A., CARRET	ERA DE ROBI, ES-081	90, SAN CUGA	R DE VALLES			
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City	State		Zip	Country		
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Given Name (first and r	niddle (if any))		Family Name or Surname			
Inventor's Signature				Date		
Residence: City	State		Country	Citizenship		
Mailing Address						
City	State	-	Zip	Country		
Name of Additional Joint Inve	ntor, if any:	A pe	tition has been filed for	this unsigned inventor		
Given Name (first and n		Family Name or Surname				
Inventor's Signature				Date		
Residence: City	State		Country	Citizenship		
Mailing Address						
City	State		7in	Country		

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